PTO/SB/06 (12-04)

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Under the Paperwork Reduction Act of 1895, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 751734 10 Substitute for Form PTO-875 OTHER THAN APPLICATION AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$) RATE (\$) FEE (\$) BASIC FEE (37 CFR 1.16(a), (b), or (c)) SEARCH FEE (37 CFR 1.16(k), (i), or (m)) EXAMINATION FEE (37 CFR 1.18(0), (p), or (q)) TOTAL CLAIMS OR minus 20 = (37 CFR 1.18(i)) INDEPENDENT CLAIMS minus 3 (37 CFR 1.18(h)) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See (37 CFR 1.16(s)) 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16()) TOTAL * If the difference in column 1 is less than zero, enter "O" in column 2. TOTAL **APPLICATION AS AMENDED - PART II** OTHER THAN OR" (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY (Column.1) HIGHEST CLAIMS PRESENT RATE (S) RATE (\$) ADDI-ADDL REMAINING NUMBER 113/05 PREVIOUSLY EXTRA TIONAL TIONAL AFTER **IENT** FEE (\$) FEE (\$) MENDMENT **PAID FOR** Minus Total (37 CFR 1.16(7)) × 25 30 OR 50 ENDIN ×100 = ×200 OR Application Size Fee (37 CFR 1.16(s)) 360 180 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I)) OR TOTAL ADD'L FEE TOTAL OR ADD'L FEE 7.10.06 (Column 1) (Column 2) (Column 3) CLAIMS HIGHES1 PRESENT RATE (\$) ADDI RATE (\$) ADDI-RCE REMAINING NUMBER EXTRA TIONAL FEE (\$) PREVIOUSLY TIONAL AFTER FEE (\$) MENDMENT PAID FOR ENDMEN Minus Total 13 20 ×25 × .50 OR (37 CFR 1.180)) 2 200 ×/06 OR-Application Size Fee (37 CFR 1.16(s)) 360 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) 180 OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE . If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS Appress SEND TOC. Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450. ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.